

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED
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PLEASE PRINT

NEW HAMPSHIRE

I. Name of Lobbyist(s) Richar	d Sigel			DEPARTMENT OF 517
II. Name of lobbyist's partnersh	ip, firm or corpo	ration, if any:	· · ·	
McLane Middleton Govern			s, LLC	
(Name of partners	hip, firm or corpora	tion)	-	
900 Elm Street, P.O. Bo	эж 326	Manchester	NH	03105-0326
Business Address: (Street)	(To	own/City)	(State)	(Zip Code)
(603) 628-1489	(603) <u>62</u>	5-5650	e-mail_richar	d.sigel@mclanegps.com
(Telephone)		(Fax)		
III. This statement covers: (Cho reportable expense transactions				nay file a separate report for
All reportable transactions occ	urring in the mon	ths prior to the re	porting date relative to t	he following client:
Well Sense Health Plan				
	of Client as it appear	ars on the Lobbyist	Registration Form)	
OR ☐ All reportable transactions by t unrelated to any particular elient.	he lobbyist (includ	ding the lobbyist`	s family), or the lobbyir	ng firm listed below which are
IV. Date of Report April 25, Reports cover: activity from date	2018 🗌 of registration to 3/	/31/18 act	July 25, 2018 wity from 4/1/18 to 6/30/1	8
October 3	11, 2018		January 30, 2019 🔀	
V. There have been no fees re If this box is checked, complete just Concord, NH 03301.		•		<u>•</u>
VI. Check if additional reports a	re attached:			
If you have received fees or m		you must file Ac	dendum A- Fees and E	Expenses
☐ If you have paid an honorarium Expense Reimbursement	n or reimbursed e	xpenses, you mus	t file Addendum B - R	eport of Honorariums or
🛚 If you, your firm, or your fam	ly has made politi	ical contributions	, you must file Addend	um C- Political Contributions
Sworn Statement/Affirmation by I have read RSA 15, RSA 15-B, R and complete to the best of my known of lobbyist) Richard Sigel (Print Name of lobbyist)	SA 14-C and RSA		swear or affirm that the	

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Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

II. Name of lobbyist's partnership, firm or corporation, if any:		
McLane Middleton Government & Public Strategies, LLC (Name of partnership, firm or corporation)	<u> </u>	
III. Name of Client Well Sense Health Plan	Dava	
III. Name of Chem work beine hearth right	Date	
V. Fees Received ndicate the gross amount of all fees received from the client identified above o lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greeduced by any expenses:	relations, or	public relations serv
1) Total of all fees received in this reporting period	a) \$	24,000.00
Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year).		72,000.00
) Total of all fees received to date (Add lines a and b)	c) \$	96,000.00
 Indicate the amount of any such fees that are due, but have not yet been paid 	d) S	0.00
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to represes. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office extendividual expenses where the expenditure was of \$25.00 or less (for example, unch where the cost was \$25.00 or less, purchase of a pen with a value of less in itemized statement of each individual expenditure made during this report in the purpose not covered by (a) (for example: purchase of a meal with value eremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if e may be filed e aggregate to epenses; (b) the e: meals purce ss than \$10 the d with a value riting period of the of greater er than \$25, be expense rein	xpenditures are made for the lobbyist(s)/fi tal of all expenses p that aggregate total of hased during a busin at is given to the per e of \$25.00 or less); f greater than \$25.00 than \$25, purchase of the purchase of the per than \$25, purchase of the per than \$25, purchase of the per
Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$	24,000.00
n a), of \$25 or less.	b) \$	0.00
Total of all itemized expenditures reported in detail in section VI	215	0.00

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$	24,000.00
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$	72,000.00
f) Total of all expenses year to date	n) \$	96,000.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees o	luring this reporting
Paid to:	Amount:	
	\$	
	\$	
	\$	7. 5. 2
	\$	
	s	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the for	egoing information
(Signature of lobbyist)	1/2	9/107 ate)
Richard Sigel (Print Name of lobbyist)		

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